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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/508,251	04/10/2000	NAOSHI FUKUSHIMA	065678/0101	9585
7	590 07/09/2002			
STEPHEN B MAEBIUS			EXAMINER	
FOLEY & LAI 3000 K STREE	RDNER ET NW SUITE 500		HELMS, LARRY RONALD	
WASHINGTON HARBOUR WASHINGTON, DC 20007-5109			ART UNIT	PAPER NUMBER
	,		1642	
			DATE MAILED: 07/09/2002	15

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)	
Interview Summary	09/508,251	FUKUSHIMA ET	AL.
interview cummary	Examiner	Art Unit	
	Larry R. Helms	1642	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Larry R. Helms</u> .	(3)		
(2) Ms McDevitt.	(4)		
Date of Interview: <u>08 July 2002</u> .			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2) applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>none</u> .			
Identification of prior art discussed: <u>none</u> .			
Agreement with respect to the claims f) was reached.	g) was not reached. h)	N/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Advsed Ms. McDevitt that removed and the amendment filed 5/7/02 has been entered to the comment of the general reached.</u>	at the finalityof the Office Action	n mailed 11/7/01	
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
<ul> <li>i) ☑ It is not necessary for applicant to provide a se checked).</li> </ul>	eparate record of the substanc	e of the interview	(if box is
Unless the paragraph above has been checked, THE FORMUST INCLUDE THE SUBSTANCE OF THE INTERVIEW action has already been filed, APPLICANT IS GIVEN ONE STATEMENT OF THE SUBSTANCE OF THE INTERVIEW reverse side or on attached sheet.	. (See MPEP Section 713.04) MONTH FROM THIS INTERV	. If a reply to the VIEW DATE TO	e last Office FILE A
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	NI.		
	<i></i>	//	
Examiner Note: You must sign this form unless it is an			
Attachment to a signed Office action.	Examiner's signa	ature, if required	